Effective October 1, 2003 10/7/9558												58
	·	CLAIMS	_	ED - PART I				SMALI TYPE	ENTIT			ER THAN
TOTAL CLAIMS							7	RATI	E FE		RATE	L ENTITY
Ŀ	FOR			NUMBER FILED NUM				BASIC		00	BASIC F	
	OTAL CHARG	EABLE CLAIMS	1/9	ninus 20=			1	X\$ 9:			<u>"</u>	
18	IDEPENDENT	CLAIMS .		Aminus 3 =			1		∸{	\dashv°	R X\$18:	
M	ULTIPLE DEP	ENDENT CLAIM	·		П	1 1	X43=		^	R X86=		
•	Hathe difference in column 1 is less than zero, enter "0" in column 2						' [+145=	-	0	R +290=	_
	CLAIMS AS AMENDED - PART II							TOTAL			R TOTAL	720
	(Column 1) (Column 2) (Column 3)							SMAL	L ENTIT	Y OF		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER ISLY	PRESENT		RATE	ADD TION. FEE	AL .	RATE	ADDI- TIONAL FEE
	Total	14	Minus	-90)	E /		X\$ 9=		OF	X\$18=	1
	Independent	1. 2	Minus	W	3	= /		X43=	1	7	` 	/
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1-	/ OF	` 	/
		L	+145= TOTAL	 /	OR		/					
		_(Column_1)		(Column	21	(Column 3)	Αľ	DOIT. FEE		OR	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING		HIGHES NUMBE	T R	PRESENT	Γ		ADDI	7		ADDI-
		AFTER AMENDMENT		PREVIOUS PAID FO		EXTRA	L	RATE	TIONA FEE	L	RATE	TIONAL FEE
	Total	• .	Minus .	••				X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	OENOENE O		=		X43=,		OR	X86=	
		NATION OF MIC	JETIPLE DE	PENDENT CL	AIM		1	145=			+290=	
		•					L	TOTAL		OR	TOTAL	
	5.	(Column 1)		(Column	2) ((Column 3)	ADI	DIT. FEE	<u> </u>	JOR .	ADDIT. FEE	
2		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA	F	ATE	ADDI- TIONAL]	RATE	ADDI- TIONAL
	Total	•	Minus	**		=	T,	\$ 9=	FEE	1 1	Y242	FEE
; L	ndependent		Minus	***	1	=	-		<u> </u>	OR	X\$18=	
1	FIRST PRESE	VTATION OF MU	LTIPLE DEF	ENDENT CL	AIM		<u> </u>	43=	-	OR	X86≃	
Hi	he entry in colum	in 1 is less than the	Antry in exten	TIO 2 Media 901 :	·	2	<u> </u>	45= :		OR	+290=	
H	the "Highest Num	iber Previously Paid iber Previously Paid	d For IN THIS	SPACE is less	than a	20, enter 20.	· ADDI	TOTAL T. FEE		OR A	TOTAL DDIT. FEE	
* 61	e uihisa uaut	er Previously Paid	For" (Total or	Independent) is	i the hi	ghest number fo	ni bnux	the appr	opriate bo	x in colu	mn 1.	1.

OAM PTO-875 (Rev. 10/03)